



**An Integrated Approach to  
Chronic Disease Prevention:  
the Steps to a  
HealthierNY Model**

**Thanks to our Sponsors:**

- School of Public Health, University at Albany
- NYS Department of Health
- NYS Community Health Partnership

**Special Thanks to**

- NYS Association of County Health Officials
- NYS Nurses Association

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**Evaluations**

Please visit

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to fill out your evaluation and post test.

Your feedback is invaluable to this  
program.

*Thank you!*

**School of Public Health  
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## Integrated Approach

- Addresses the leading causes of death and disability.
- Addresses the major risk factors.
- Reaches the general population and also targets high risk and priority populations in all the places in which members of the communities are found.

## Benefits of Integration

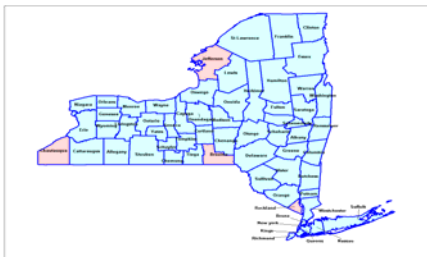
- Provides opportunities for programs to work together.
- Promotes collective thinking and problem solving.
- Supports working together in new ways so that the impact of all programs is improved.



## Steps Focus

- Diabetes
- Obesity
- Asthma
- Nutrition
- Physical Activity
- Tobacco

## Steps Counties



## Cost of Chronic Disease

- 7 of 10 deaths attributable to chronic diseases.
- Health care costs were \$1.66 trillion in 2003.
- Costs attributed to the diagnosis and treatment of chronic diseases and conditions.

## Integrated Approach

- Interventions:
  - Intertwined
  - Play off and promote each other
  - Impact multiple disease/risk factor area
  - Promoted by multiple partners and venues
  - Target people throughout the life span
  - Community-driven
  - Developed by a diverse team



## Benefits of Integration

- Promotes partnerships.
- Avoids duplication of efforts.
- Maximizes resources.
- Enhances coordination between systems.
- Develops systematic identification of common problems and gaps and shares opportunities for addressing them.
- Enables sharing of data and best practices.

## Key to Success

- Community engagement.
- Community consortium.
- Traditional and non-traditional partners.
- Community investment and ownership.

## Traditional Partners

- Health Department
- Hospitals
- Clinics
- Cooperative Extension
- Non-profit Health Organizations

## Non-traditional Partners

- Faith-based Communities
- Schools/Colleges
- Parks & Rec.
- Senior Centers
- Worksites
- Media
- Elected Officials
- Farmers
- Department of Transportation
- Transit Authority
- Lowes
- YMCA/YWCA
- Subway
- Public Housing
- Insurance Companies
- Independent Living Cntrs

## Community Action Plans

- Engage community members and consortium.
- Base on community's goals.
- Use evidence-based strategies.
- Create supportive environments.
- Outline community-based interventions.
- Plan evaluation strategies.

## Community Ownership

### Benefits to participants:

- Involvement in decision-making process.
- Voices heard.
- Leadership roles.
- Positive energy and enthusiasm.
- Design, develop, and evaluate interventions.

## Application of Integration

- Form a community consortium
- Work with non-traditional partners
- Partner with categorically funded programs
- Share resources and media
- Network
- Reach clients with multiple messages and services
- Collaborate on funding requests

## Resources

- Steps to a HealthierUS  
<http://www.healthierus.gov/steps/index.html>
- Comprehensive and Integrated Chronic Disease Prevention Action Planning Handbook for States and Communities Partnership for Prevention  
<http://www.prevent.org/news.cfm?id=60>

## For Further Information

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